



Baser Law

Immigration is our business

“GREEN CARD” QUESTIONNAIRE

1. PERSONAL INFORMATION

Full Name: _____ (Male) (Female)
U.S. Address: _____ Home Phone: _____
_____ Cell Phone: _____
Email Address: _____
Date of Birth: _____ Place of Birth: _____
City, State, Country
Country of Citizenship: _____ SSN# _____
Passport Number: _____ Issue Date: _____ Exp. Date: _____
I-94 Number: _____ Date and Place of Last Entry: _____
Current Immigration Status: _____ Expiration Date: _____

Are you married? Yes No – If yes:

Date of Marriage: _____
Spouse's Full Name: _____
Date of Birth: _____ Place of Birth: _____
City, State, Country
Country of Citizenship: _____ SSN# _____
Passport Number: _____ Issue Date: _____ Exp. Date: _____
I-94 Number: _____ Date and Place of Last Entry: _____
Current Immigration Status: _____ Expiration Date: _____

Do you have children? Yes No – If yes, how many: _____

Child's Full Name: _____ (Male) (Female)
Date of Birth: _____ Place of Birth: _____
City, State, Country
Country of Citizenship: _____ SSN# _____
Passport Number: _____ Issue Date: _____ Exp. Date: _____
I-94 Number: _____ Date and Place of Last Entry: _____
Current Immigration Status: _____ Expiration Date: _____

Child's Full Name: _____ (Male) (Female)
Date of Birth: _____ Place of Birth: _____
City, State, Country
Country of Citizenship: _____ SSN# _____
Passport Number: _____ Issue Date: _____ Exp. Date: _____
I-94 Number: _____ Date and Place of Last Entry: _____
Current Immigration Status: _____ Expiration Date: _____

Child's Full Name: _____ (Male) (Female)
Date of Birth: _____ Place of Birth: _____
City, State, Country
Country of Citizenship: _____ SSN# _____
Passport Number: _____ Issue Date: _____ Exp. Date: _____
I-94 Number: _____ Date and Place of Last Entry: _____
Current Immigration Status: _____ Expiration Date: _____

Child's Full Name: _____ (Male) (Female)
Date of Birth: _____ Place of Birth: _____
City, State, Country
Country of Citizenship: _____ SSN# _____
Passport Number: _____ Issue Date: _____ Exp. Date: _____
I-94 Number: _____ Date and Place of Last Entry: _____
Current Immigration Status: _____ Expiration Date: _____

Have you ever been denied a visa to come to the United States? Yes No

If yes, please explain **in detail**: _____

Have you or your spouse ever had **any** immigration problems? If yes, please describe **in detail**:

Have you ever been **arrested, cited, indicted, fined or convicted of a crime** anywhere in the world (even if the conviction was expunged or removed from your record) or have you ever had any problems with the law?

Yes No -- If yes, please explain **in detail**: _____

2. EDUCATIONAL BACKGROUND

All college/university education, starting with the highest level achieved:

Degree: _____ Field of Study: _____

Name of Educational Institution: _____

Full Address of Education Institution: _____

Year Degree completed: _____

Degree: _____ Field of Study: _____
Name of Educational Institution: _____
Full Address of Education Institution: _____
Year Degree completed: _____

Degree: _____ Field of Study: _____
Name of Educational Institution: _____
Full Address of Education Institution: _____
Year Degree completed: _____

Training Certificates:

Certificate Name: _____
Name of Issuing Institution: _____
Month/Year Certificate received: _____

Certificate Name: _____
Name of Issuing Institution: _____
Month/Year Certificate received: _____

Certificate Name: _____
Name of Issuing Institution: _____
Month/Year Certificate received: _____

3. CURRENT EMPLOYMENT

Employer Full Name: _____
Employer Full Address: _____

Type of Business: _____

Job Title: _____ Salary/Hourly Rate: _____

Start Date (mm/dd/yyyy): _____ Hours/Week: _____

Primary Worksite Address: _____

Other Worksite Address(es), including possible future ones, if applicable: _____

Minimum Education Required: _____ Field: _____

Is Experience Required? Yes No – If yes, what field:_____

Is knowledge of a foreign language required? Yes No

– If yes, what language:_____

Job Duties: _____

Specific skills or other requirements: _____

4. EMPLOYMENT HISTORY

Start previous employment with the most recent (include employers, not projects):

Employer Full Name: _____

Employer Full Address: _____

Type of Business: _____

Job Title: _____ Hours/Week: _____

Start Date (mm/dd/yyyy): _____ End Date (mm/dd/yyyy): _____

Job Duties: _____

Employer Full Name: _____

Employer Full Address: _____

Type of Business: _____

Job Title: _____ Hours/Week: _____

Start Date (mm/dd/yyyy): _____ End Date (mm/dd/yyyy): _____

Job Duties: _____

Employer Full Name: _____

Employer Full Address: _____

Type of Business: _____

Job Title: _____ Hours/Week: _____

Start Date (mm/dd/yyyy): _____ End Date (mm/dd/yyyy): _____

Job Duties: _____

Employer Full Name: _____

Employer Full Address: _____

Type of Business: _____

Job Title: _____ Hours/Week: _____

Start Date (mm/dd/yyyy): _____ End Date (mm/dd/yyyy): _____

Job Duties: _____

Employer Full Name: _____

Employer Full Address: _____

Type of Business: _____

Job Title: _____ Hours/Week: _____

Start Date (mm/dd/yyyy): _____ End Date (mm/dd/yyyy): _____

Job Duties: _____

Employer Full Name: _____

Employer Full Address: _____

Type of Business: _____

Job Title: _____ Hours/Week: _____

Start Date (mm/dd/yyyy): _____ End Date (mm/dd/yyyy): _____

Job Duties: _____

5. REQUIRED SUPPORTING DOCUMENTS

Please provide us with one (1) copy of each of the following documents:

1. Updated resume;
2. All educational credentials including any diplomas and transcripts/grade reports;
3. Any letters obtained from prior employers, which verify your employment details (If you do not have any letters, do not obtain any at this time. If needed, we will instruct you on how to proceed);
4. Proof of current immigration status, if not processed by Baser Law (I-94 Card, I-797 Approval Notice, Petition as filed with CIS, etc.)

I certify that all of the information contained in this form is true and correct to the best of my knowledge.

Signature

Date